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## \*BIBDATASHEET\*

CONFIRMATION NO. 1533

Bib Data Sheet

<b>SERIAL NUMBER</b> 09/980,823	<b>FILING OR 371(c) DATE</b> 08/28/2002 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1647	<b>ATTORNEY DOCKET NO.</b> REVEL=16
<b>APPLICANTS</b> Michel Revel, Rehovot, ISRAEL; Judith Chebath, Rehovot, ISRAEL; Marina Pizzi, Brescia, ITALY; PierFranco Spano, Milano, ITALY; Ursula Boschert, Troinex, SWITZERLAND;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IL00/00363 06/21/2000				
<b>** FOREIGN APPLICATIONS *****</b> ISRAEL 130586 06/21/1999				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 9
Verified and Acknowledged _____ Examiner's Signature Initials		<b>INDEPENDENT CLAIMS</b> 3		
<b>ADDRESS</b> 1444				
<b>TITLE</b> II6riI6 chimera for the treatment of neurodegenerative diseases				
<b>FILING FEE RECEIVED</b> 1104	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	